Foreword from Kai Whakahaere

E nga mana, e nga reo,
E nga karangatanga maha o nga hau e wha,
Tenei te mihi atu ki a koutou katoa

All authorities, all voices, and
All the many relations from the four winds
I greet you all

Tena koutou,

The Standards of Practice for Mental Health Nursing in Aotearoa New Zealand were created in 1994 and are now adapted for Te Ao Maramatanga New Zealand College of Mental Health Nurses Inc. During the original collaboration process (and the most recent) the working party affirmed a professional commitment to Te Tiriti o Waitangi, as Aotearoa New Zealand’s founding document, and the inherent principles of partnership, participation, protection and tino rangatiratanga (self-determination).

The result of that commitment is twofold. A professional nursing organisation that recognises the nature of the relationship between Maori and the Crown as articulated in Te Tiriti and that willingly ensures that this relationship be reflected appropriately within the constitution of Te Ao Maramatanga. Secondly a professional nursing organisation that clearly demonstrates an understanding of the importance of all relationships (and in particular with tangata whaiora/services users) being forged on principles such as partnership, participation, protection and tino rangatiratanga.

Te Tiriti o Waitangi since 1840 significantly underpins Maori notions of identity and integrity as tangata whenua in Aotearoa New Zealand. Today the mental health status of Maori is of growing concern and is identified as a priority area in the government health and disability strategy. By recognising the importance and relevance of Te Tiriti within mental health nursing Te Ao Maramatanga articulates its support towards strong Maori identity, self-esteem and cultural esteem; the fundamental elements of human well being. It is fitting from a Maori perspective that Te Tiriti and Treaty principles are integral to the achievement of excellence in the practice of mental health nursing. They are also integral to the health outcomes that are most wanted by tangata whaiora/service users, whanau/family, and iwi/communities for all peoples in Aotearoa New Zealand.

Noho ora mai.

Hineroa Hakiaha
Kai Whakahaere
President’s Foreword

Tena koutou katoa

It is almost ten years since the former New Zealand Branch of the Australian and New Zealand College of Mental Health Nurses developed its Standards of Practice for Mental Health Nursing in Aotearoa New Zealand. The development of that document was a defining moment in the development of the profession. Over the past decade the Standards have been extensively used in clinical practice development, education, and research.

The launch of Te Ao Maramatanga provides an opportunity for reflection on the achievements of the profession and to look toward the challenges of the decades to come. The second edition of the Standards carries a new name, a new logo and a new message to the mental health sector. Mental health nursing has achieved a level of maturity that allows the College to articulate mental health issues at all levels of service and policy development as an indigenous, autonomous professional organisation. As such the Standards will continue to play a central role in our professional advocacy.

As much as any professional group, mental health nurses are aware of the constantly changing context of care. Mental health care is now firmly established as primarily a community service which, together with inpatient services provide the core components of an integrated mental health service. Forensic services have grown considerably over the past ten years and now constitute a significant component of the mental health service. Since the Standards were first developed we have seen the development of the Mental Health Commission, the Office of the Health and Disability Commissioner, and the Nurse Practitioner role, and increased emphasis on involvement of users of mental health services. Mental health nurses have provided an essential workforce that has seen the growth in the volume and diversity of services. The Standards have provided a touchstone for mental health nursing over this period of change.

On the occasion of the launch of Te Ao Maramatanga it is fitting to acknowledge those Aotearoa New Zealand mental health nurses whose commitment and energy led to the establishment of the New Zealand Branch of the Australian and New Zealand College of Mental Health Nurses in 1994, and have continued to sustain it since. The roles of Kai Whakahaere and Maori Caucus are likely to become more important for the College as we participate in international forums as a fully autonomous professional body. It is with great pleasure, therefore, that I acknowledge the foreword from our Kai Whakahaere contained in this document.

These Standards remain a critical element underpinning quality mental health nursing practice for all mental health nurses in Aotearoa/New Zealand. I would like to echo the words of the inaugural President Frances Hughes in commending these standards to all mental health nurses.

Tony O’Brien
President
Preface to First Edition

Kia Ora

Public opinion is calling attention to aspects of health care that reflect values and humanitarian concerns as a result of witnessing the devastating effects of mental illness, alcohol and drug abuse, an ageing population, and the growing numbers of disenfranchised and homeless people. The public health problems challenging our nation require nursing expertise and intervention. The publication of these standards represents a significant advance in the practice of Mental Health Nursing in New Zealand. In its present position of advocating the uniqueness of Mental Health Nursing, the Australian & New Zealand College of Mental Health Nurses, Inc. is providing guidelines which the client, their family/whanau and advocates can expect to receive from Mental Health Nurses in New Zealand.

For the beginning and experienced practitioner, these are standards of practice that must be maintained. The New Zealand Branch of the Australian & New Zealand College of Mental Health Nurses, Inc. celebrates and applauds the efforts of the Standards Committee. They diligently and steadfastly interfaced with Practitioners, Educators, Consumers, and members of the General Public over the past two years. They compiled data, wrote and re-wrote, until this document was produced.

It is hoped that this document will be used in the spirit that it was written. That is to provide standards for practice to nurses working in the field of Mental Health.

Frances Hughes
Inaugural President
on behalf of the New Zealand Branch Executive
INTRODUCTION

Te Tiriti o Waitangi

Te Tiriti o Waitangi underpins the provision of health care for all New Zealanders.

The four treaty principles shape the practice of Mental Health Nursing:

♦ Partnership
♦ Protection
♦ Participation
♦ Tino rangatiratanga (self determination)

Nurses within Te Ao Maramatanga (New Zealand College of Mental Health Nurses) incorporate in their practice the principles of Te Tiriti o Waitangi.

The profession of Nursing is mandated by society to provide a service that is beneficial to the members of that community. This mandate means that those people identified as nurses are charged to practice nursing in accordance with the laws, values, standards and expectations of society.

The primary focus of care is the consumer. Nursing works in partnership with people as health care consumers, acknowledging and valuing their personal expertise and giving a specialised form of support as they work their way through a health-related experience.

Nursing practice is characterised by the judicious, skillful, situation-specific application of nursing knowledge, which enhances the dignity of each person and sustains their cultural safety. The expected competency level performance is determined by a set of standards.

Mental Health Nursing

Mental Health Nursing is a specialised expression of nursing which focuses on meeting the mental health needs of the consumer, in partnership with family/whanau and the community in any setting. It is a specialised interpersonal process embodying a concept of caring which has a therapeutic impact on the consumer, the family or whanau and the community, within their cultural context, by:

♦ Supporting consumers to optimise their health status within the reality of their life situation
♦ Encouraging consumers to take an active role in decisions about their care
♦ Involving whanau and communities in the care and support of consumers
The Mental Health Nurse recognises the need for flexibility, adaptability, responsiveness, and sensitivity as they continually shape their practice to the dynamically changing needs of the consumer, family/whanau and the community.

**Mental Health Nurse**

A Mental Health Nurse is registered with the Nursing Council of New Zealand under the Registered Nurse or Nurse Practitioner scope of practice, and is authorised to practise in the area of mental health.

Each Mental Health Nurse is accountable for their own practice and for the nursing work performed by staff under their supervision.

**Competency-based Standards for Professional Practice in Mental Health Nursing**

Entry-level standards for the profession of nursing are established by the Nursing Council of New Zealand. They represent the level of competency expected of every comprehensive nurse at the time of completion of the undergraduate nursing programme and admission to the register.

Competency-based standards for professional practice in Mental Health Nursing represent the standard of performance which can be expected from a registered nurse who has been working for a period of the equivalent of two years full-time in any mental health context. These standards complement and extend the competency-based standards for professional practice expected from all registered nurses.

The standards for Mental Health Nursing have been developed to inform the public and to guide the professional nurse about the expected level of competence in the context of mental health. They provide a foundation for public accountability as well as serving as a guide for the evaluation of nursing performance.

In order for standards to remain relevant at a time of dramatic change in the health care service and in particular, mental health care, these standards will be clinically validated in practice through formal research and will also be regularly reviewed at two yearly intervals.
Principles Underlying the Standards for Mental Health Nursing

The standards for professional Mental Health Nursing practice are based on three principles:

♦ Standards are concerned with the performance and outcomes of the professional practitioner in the context of their usual working environment

♦ Standards for professional practice include definition of the key personal attributes that are believed to underlie competence in the context of Mental Health Nursing

♦ Standards for professional practice specify the level of performance required, the outcomes to be anticipated and the context in which the performance will take place
STANDARDS FOR MENTAL HEALTH NURSING PRACTICE

The Mental Health Nurse:

I ensures her/his practice is culturally safe

II establishes partnerships as the basis for a therapeutic relationship with consumers

III provides nursing care that reflects contemporary nursing practice and is consistent with the therapeutic plan

IV promotes health and wellness in the context of her/his practice

V is committed to ongoing education and contributes to the continuing development of the theory and practice of Mental Health Nursing

VI is a health professional who demonstrates the qualities of identity, independence, authority and partnership

Advanced Practice Standard

Mental Health Nurses demonstrate advanced practice when they are able to integrate at a level of excellence the six previous standards using skills in clinical practice, leadership, management, research and education.
STANDARD I The Mental Health Nurse ensures her or his practice is culturally safe

Rationale

In 1840 William Hobson, the representative of the British Crown, signed a treaty at Waitangi with the chiefs of most Maori tribes in New Zealand. The treaty is considered the founding document for the nation. It represents an agreement between two equal partners, and involves the sharing of both power and decision making. All the peoples who have settled in New Zealand since 1840 are challenged to consider their relationship with the Tangata Whenua.

Registered Nurses working within New Zealand in the mental health care setting acknowledge Te Tiriti o Waitangi as New Zealand’s founding document and incorporate the Treaty principles - partnership, protection, participation and self-determination - in their practice.

Paradoxically, Mental Health Nurses’ recognition of the special place of the Tangata Whenua enables them to value their own culture as well as all others who are different - ethnicity, gender, marital status, age, disability, beliefs, sexual orientation, employment and family status.

Attributes

a. Knowledge

The Mental Health Nurse is familiar with:

I. The Maori and English versions of Te Tiriti o Waitangi

II. The statutory requirements within legislation enacted from time to time by the New Zealand Parliament which are relevant to nursing practice

III. The meaning of the principles of partnership, protection, participation and self-determination in relation to Mental Health Nursing

IV. The knowledge and understanding of the Tangata Whenua in relation to health

V. The multidimensional inter-related needs of consumers of mental health services and their family/whanau

VI. The rights of consumers and their family or whanau

VII. The meaning and application of the principles of informed consent
VIII. The availability and role of health consumer advocates

IX. The inbuilt prejudices and barriers which are present within health care bureaucracies and institutions

X. The personal prejudices and barriers within the individual nurse which may impede the effectiveness of their practice

b. **Skills**

The Mental Health Nurse is able to:

I. Recognise the impact of Te Tiriti o Waitangi (Treaty of Waitangi) in all aspects of his or her practice

II. Maximise the safety of each consumer, family and whanau in relation to their culture, ethnicity, gender, marital status, age, disability, beliefs, sexual orientation, employment and family status.

III. Involve family or whanau in all decision making processes, with the consent of the consumer or at the request of the consumer nominated advocate.

IV. Develop and maintain partnerships with consumers and their family or whanau

V. Protect each consumer’s privacy

VI. Advocate for the consumer, or access appropriate advocacy, when the consumer is unwilling or unable to speak for themselves.

VII. Work in partnership with the consumer, and where appropriate their family or whanau and the community, about all aspects of their treatment options and care.

VIII. Empower consumers and their family or whanau to be aware of, and exercise their rights in relation to health care

c. **Attitudes**

The Mental Health Nurse:

I. Respects the special status, knowledge and understanding of the Tangata Whenua

II. Respects the cultural values and beliefs of all groups within the community

III. Respects and protects the rights of consumers
IV. Values the role of health consumer advocates

V. Embraces the concept of partnership with the consumer, their family or whanau, and the community

Performance Criteria

This standard has been met when:

A. Consumers report that they have felt respected and that their cultural integrity has been sustained by the Mental Health Nurse

B. Consumers recount feelings of comfort and safety in the therapeutic environment created by the Mental Health Nurse

C. People in cultural groups within the community feel encouraged and supported to develop self-help processes and practices which optimise the mental health of members of that group.

D. Processes for ongoing consultation with Tangata Whenua and other groups in the community on issues related to cultural safety are in place and have the support of all groups.
STANDARD II The Mental Health Nurse establishes partnerships as the basis for a therapeutic relationship with consumers

Rationale

The partnership which the nurse establishes with the consumer is fundamental to facilitating a positive and effective therapeutic nursing relationship. This therapeutic relationship combines the principles of the nursing partnership, the helping relationship, and therapeutic communication. The aim of the therapeutic relationship developed by the Mental Health Nurse is to promote growth, improve functioning, facilitate problem solving and encourage adaptation.

Attributes

a. Knowledge

The Mental Health Nurse is familiar with:

I. The theoretical assumptions, principles and processes associated with effective interpersonal communication, therapeutic relationships and partnerships in nursing

II. The boundaries of the therapeutic partnership between nurse and consumer

III. The ethical and legal issues associated with privacy, confidentiality and information disclosure in the mental health setting

IV. Patterns of interpersonal behaviour

V. Psychopathology and social dynamics associated with different patterns of disturbances in behaviour

VI. The process and value of clinical supervision in supporting the Mental Health Nurse

b. Skills

The Mental Health Nurse is able to:

I. Relate effectively to others

II. Establish and maintain nursing partnership

III. Plan, establish, maintain and evaluate therapeutic relationships with consumers, family or whanau and others
IV. Reflect on own practice to analyse strengths and weaknesses

V. Use personal clinical supervision to strive towards maximising the effectiveness of own therapeutic nursing role

VI. Justify and accept responsibility for own judgements and actions

c. Attitudes

The Mental Health Nurse:

I. Values the nurse/consumer partnership as the foundation for the establishment of therapeutic relationships

II. Has confidence in the independent contribution of nursing to therapy in mental health care

III. Identifies self as an independent, accountable health professional

IV. Recognises their own ability and limitations in developing therapeutic relationships and seeks appropriate support/advice

Performance Criteria

This standard has been met when:

A. The consumer, family and/or whanau expresses satisfaction with the process and outcome of the nurse/consumer partnership and the therapeutic relationship

B. The clinical supervisor and/or peer support the Mental Health Nurse’s evaluation of the impact of the therapeutic relationship on the consumer

C. Information is managed in line with legislation and policies related to privacy and confidentiality

D. The Mental Health Nurse is considered a full participating member of the multidisciplinary therapeutic team
STANDARD III  The Mental Health Nurse provides nursing care that reflects contemporary nursing practice and is consistent with the therapeutic plan

Rationale

Mental Health Nursing is a dynamic interactive process that utilises sound theoretical knowledge, scientific principles, problem solving strategies and purposeful use of self in identifying and responding to the mental health needs of the consumer. It employs a deliberate and organised approach to problem solving, involving actions, interactions and transactions directed towards maximising a consumer’s positive interactions with the environment and meeting his/her individual and social needs.

Critical thinking and clinical judgement are used in conjunction with a collaborative and consultative approach with the intention of providing integrated and individualised nursing care. Integrated care is directed towards meeting the holistic health care needs of the consumer within the context of their life situation, including their family or whanau and community.

Mental Health Nursing supports the belief that mental health is a state of balance and harmony within the person which reflects an integration of body, mind and spirit in a compatible relationship with the multidimensional environment.

Attributes

a. Knowledge

The Mental Health Nurse is familiar with:

I. The scope of practice of the Mental Health Nurse in New Zealand

II. Contemporary models of Mental Health Nursing practice

III. The process of clinical decision-making in Mental Health Nursing

IV. Dynamics of consumer behaviour in relation to mental health

V. Current psychiatric diagnosis and classification systems

VI. Therapeutic interventions and treatment modalities utilised in primary, secondary and tertiary prevention

VII. Therapeutic use of self

VIII. Complementary and somatic therapies utilised in mental health care

IX. Philosophical assumptions underpinning the concept of holism
X. Principles of therapeutic communication relating to disturbed behaviour patterns

XI. Principles of adult learning

XII. Principles of crisis intervention and management

XIII. Principles and process of counselling

XIV. Principles of de-escalation of anger and aggression

XV. Discharge planning

b. Skills

The Mental Health Nurse is able to:

I. Orient the consumer to the mental health setting

II. Establish trust by developing rapport, reducing anxiety, encouraging consumer, family/whanau participation and clarifying issues related to privacy

III. Establish a therapeutic environment in collaboration with other health professionals

IV. Facilitate the process of comprehensive nursing assessment

V. Assess the contextual factors which are impacting on the consumer and the therapeutic relationship

VI. Identify and interpret recurrent patterns of behaviour

VII. Collaborate with consumer, family or whanau, and other colleagues to develop a nursing plan for care

VIII. Document assessment outcomes, nursing management plan, strategies for care and outcomes

IX. Communicate nursing plan for care to consumer and other members of the therapeutic team

X. Implement nursing care in a systematic, coordinated, caring and consistent manner

IX. Initiate steps to address deficiencies/limitations in the nursing and therapeutic plans

XII. Evaluate and document the effectiveness of planned interventions in consultation with the consumer, and in collaboration with the multidisciplinary team
XIII. Review nursing interventions and outcomes, and revise when appropriate
XIV. Apply knowledge of therapeutic interventions to clinical practice
XV. Use nursing strategies to de-escalate a potentially dangerous situation
XVI. Use strategies for consumer restraint which are ethically, legally and therapeutically safe and maintain the dignity of the person
XVII. Maximise physical safety of the environment to achieve positive outcomes

c. **Attitudes**

The Mental Health Nurse:

I. Respects the integration of each person and their interaction with the environment

II. Pursues the collaborative and consultative approach to care

III. Appreciates the importance of consistency and continuity of care

IV. Acknowledges the importance of research validated therapeutic and culturally safe approaches

V. Values a coordinated, multidisciplinary approach in mental health care

VI. Recognises and promotes the consumer’s right to actively participate in their own nursing care

VII. Acknowledges the importance of identifying and acting on consumer choices whenever possible

**Performance Criteria**

This standard has been met when:

A. The consumer and family or whanau confirm that they have been fully involved in all aspects of care

B. The Mental Health Nurse is able to interpret and justify the nursing plan and therapeutic relationship in relation to contemporary Mental Health Nursing and current approaches to mental health care

C. The nursing management plan accurately reflects the outcomes of ongoing nursing assessment, collaboration with the consumer, family or whanau and consultation with other members of the mental health team
STANDARD IV The Mental Health Nurse promotes health and wellness in the context of their practice

Rationale

Health promotion strategies aim to optimise the health status of individual consumers, families or whanau and communities. Optimising health and wellness within the reality of a consumer’s life circumstances is a planned outcome within each nursing partnership.

Equity of access to culturally safe health and wellness promoting resources is a concern for the nurse. Mental Health Nursing practice will include strategies to minimise differences and maximise equity in the distribution and utilisation of health care resources so that all people within the community can achieve their full health potential.

The Mental Health Nurse has a professional responsibility to role model health promoting behaviours.

Attributes

a. Knowledge

The Mental Health Nurse is familiar with:

I. Theories and models of health care and health education directed towards health promotion

II. Contemporary mental health policy and planning related to health promotion and illness prevention

III. Cultural and ethnic determinants of health beliefs, attitudes and behaviours of identified population groups within the community

IV. Vulnerable groups and disadvantaged populations within the community

V. The profession’s and employer’s philosophy and policies related to health promotion

VI. Health beliefs and practices in Maori and other cultural groups within the New Zealand community
b. **Skills**

The Mental Health Nurse is able to:

I. Access and work with individuals, families and the community to promote health and decrease risk of illness

II. Assist consumers, family or whanau and groups within the community to achieve maximum control over identification and prioritisation of their own health needs

III. Assist the consumer, their family or whanau and the community to attain access to accurate and relevant health knowledge

IV. Initiate and/or contribute to professional and community activities designed to promote health

V. Promote mental wellness by maximising the range of lifestyle choices and informed decisions available to consumers of mental health care

VI. Work collaboratively with colleagues, other health professions, individuals and community groups to improve mental health awareness

VII. Translate global issues relating to the maintenance of optimal health to the local community environment

c. **Attitudes**

The Mental Health Nurse:

I. Recognises and values the reality that health and wellness are culturally defined

II. Is willing to engage in activities that will enhance the individual and the community’s existing skills and knowledge base in relation to health promotion.

III. Values the importance of the role of education in mental health promotion and mental illness prevention

IV. Views each society and each member of society as worthy of support to optimise their health status through health promoting and illness preventing activities

V. Appreciates that global issues can and do impact on the local environment

VI. Values the contribution health promoting activities can have on the health status of the local and global community
Performance Criteria

This standard has been met when:

A. There is evidence of collaboratively developed strategies to optimise health in every nursing partnership

B. The Mental Health Nurse can identify health promoting strategies in own life

C. Strategies to promote mental health and wellness in the community demonstrate evidence and awareness of, and adaptation to, the cultural values, beliefs and practices of the target group.

D. Consumers are able to demonstrate the impact of planned health promotion strategies
STANDARD V  The Mental Health Nurse is committed to ongoing education and contributes to the continuing development of theory and practice in Mental Health Nursing

Rationale

The community, the environment, the health care services and the understanding and treatment of mental illness are involved in a constant process of change. All these, together with nursing’s own body of knowledge, continue to shape the nature of nursing practice. Each professional Mental Health Nurse maintains and enhances own professional competency, and supports the professional development of colleagues, in order to ensure that nursing practice remains relevant to the needs of consumers.

Reflective practice, innovation in theory and practice, and participation in research activities are essential for the continuing growth of Mental Health Nursing and mental health care.

Attributes

a.  Knowledge

The Mental health Nurse is familiar with:

I.  Standards of professional practice
II.  Employment-based polices and processes for a quality service
III.  Peer review, supervision and staff appraisal systems
IV.  Own career development plan
V.  Own professional strengths and limitations
VI.  Clinical career path
VII.  Education programmes, both formal and continuing education

b.  Skills

The Mental Health Nurse is able to:

I.  Articulate their own philosophy of practice
II.  Maintain a personal work-related diary that shows evidence of reflection on own practice
III. Evaluate own and peer’s practice

IV. Assume responsibility for own professional practice

V. Develop personal performance goals for own position that are consistent with contemporary Mental Health Nursing practice and the objectives of the health care agency

VI. Update and expand practices and outcomes through research including the collection of information from other practice settings

VII. Seek and utilise appropriate collegial supervision

c. Attitudes

The Mental Health Nurse:

I. Actively promotes a working culture that views professional development as a mandatory requirement to achieve excellence in practice

II. Values nursing as a separate discipline, and Mental Health Nursing as a specialised expression of nursing

III. Values informed debate about the development of the theory and practice of Mental Health Nursing

Performance Criteria

This standard has been met when:

A. The Mental Health Nurse has a current career development plan

B. The Mental Health Nurse shows evidence of participating in learning experiences relevant to own practice

C. The Mental Health Nurse actively participates in professional debate, nursing research and the development of nursing knowledge

D. The Mental Health Nurse demonstrates, or shows evidence of self and peer review in relation to expected standards of practice in Mental Health Nursing and the quality of performance expected in the health care agency
STANDARD VI  The Mental Health Nurse is a health professional who demonstrates the qualities of identity, independence, authority and partnership

Rationale

Professional accountability involves an obligation to self, profession, peers, individual consumers and the community.

Mental Health Nursing has a mandate to offer a specialised service which benefits society. Each Mental Health Nurse is individually accountable to the consumer, and their families or whanau for the care they provide. Collectively, Mental Health Nurses are accountable to the public for the quality of Mental Health Nursing knowledge and practice.

Professional practice in Mental Health Nursing is characterised by:

♦ Identity - identification with the specialist nursing area of Mental Health Nursing and a sense of what it means to be a nurse

♦ Independence - acceptance of the responsibility of each nurse to be up to date with the range of knowledge and skills essential to Mental Health Nursing practice, to know how to access information, to know when nursing is needed, to take action and to be able to provide a rationale for judgements and action which can withstand the scrutiny of peers

♦ Authority - practice which is supported by nursing’s body of knowledge, processes which add new knowledge, including research, wisdom and empirical use, a code of ethics, legislation defining the scope of practice for the Mental Health Nurse and a set of standards

♦ Partnership - the ability to reach out to another person through the effective use of self, in order to establish partnerships which provide the basis for nursing’s specialised service in mental health care

Attributes

a. Knowledge

The Mental Health Nurse understands the:

I. Characteristics of professional behaviour

II. Autonomy and accountability

III. Ethics of care
IV. Current legislation, statutory regulations, and policies shaping nursing practice and mental health care

V. Standards of practice for Mental Health Nursing - ANZCMHN Inc.

b. Skills

The Mental Health Nurse is able to:

I. Demonstrate the characteristics of professional practice in the context of Mental Health Nursing practice

II. Describe the nature of professional accountability to self, profession, peers, individual consumers and the community

III. Identify the relevance of selected legislation, and policies which influence Mental Health Nursing practice

IV. Use an ethical framework to discuss ethical issues in own practice

V. Discuss the standards of practice for Mental Health Nursing and their application in own practice

c. Attitudes

The Mental Health Nurse:

I. Accepts accountability for own practice

II. Accepts collective responsibility for the quality of Mental Health Nursing

III. Values standards of practice

IV. Values nursing knowledge

V. Values the feedback from peers, employers, consumers, their family or whanau and the community

VI. Values feedback when resolving instances of unsafe practice
**Performance Criteria**

This standard has been met when:

A. The Mental Health Nurse has a current practising certificate and is respected in the profession

B. Feedback from consumer, family or whanau, peers, and employer indicate the nurse is demonstrating an acceptable quality of professional practice

C. There is evidence that the Mental Health Nurse is actively involved in the life of the profession, accepts collective responsibility for nurturing and promoting safe practice, and for resolving instances of unsafe practice

D. There is evidence that the Mental Health Nurse is practising in accordance with the standards for Mental Health Nursing
GLOSSARY

Accountability  To be responsible for and able to explain one’s actions

Advocate  A health and disabilities’ services consumer advocate provided pursuant to an advocacy services agreement

Authenticity  Genuine, known to be true

Consumer  In this document this is used to mean the end-user of the Mental Health Service. Sometimes these persons are called clients or patients.

Culture  The way groups of people do things as a result of their beliefs, philosophy, geography and ancestry

Cultural Safety  Provision of services in a way that recognises and is compatible with the person’s cultural values, beliefs and needs (such as ethnicity, gender or sexual preference).

The first element of Cultural Safety should be consideration of the Kawa of Tangata Whenua by Maori and non-Maori alike.

Services should develop effective consultative relationships with the Tangata Whenua, and with other Maori consumer groups who are outside their tribal area. This will enable services to deliver culturally safe services to Maori, through understanding kawa and the history of Tangata Whenua.

Empowerment  To give power or authority

Ethics  Moral philosophy, moral principles

Health  An integrated state of wellbeing or harmony within the person-in-context

Holistic  The idea of systems fluctuating to adapt to changing environments. It implies wholeness, relationships, processes, interactions, freedom and creativity in viewing living and non-living entities.

Indigenous people  The original inhabitants of a country

Interpersonal  What happens between people in an interaction
<table>
<thead>
<tr>
<th><strong>Kawa</strong></th>
<th>Traditional customs that prescribe acceptable behaviour for a range of activities. Significant differences exist between Maori tribes.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mana Whenua</strong></td>
<td>The authority, power and influence, inherent in Kawa (tribal etiquette) belonging to Tangata Whenua.</td>
</tr>
<tr>
<td><strong>Mental Health Nurse</strong></td>
<td>A registered nurse entitled to practice in New Zealand in the mental health field, i.e. RCpN, RPN</td>
</tr>
<tr>
<td><strong>Philosophy</strong></td>
<td>A system of ideas concerning a particular subject, an understanding of principles</td>
</tr>
<tr>
<td><strong>Primary Care</strong></td>
<td>Care that focuses on the promotion of mental wellness and prevention of mental illness</td>
</tr>
<tr>
<td><strong>Safety</strong></td>
<td>Freedom from danger or risks likely to bring danger to one’s physical or mental wellbeing</td>
</tr>
<tr>
<td><strong>Secondary Care</strong></td>
<td>Care that is involved in acute mental illness whether it be inpatient or outpatient</td>
</tr>
<tr>
<td><strong>Tertiary Care</strong></td>
<td>Care that is involved in the long term care of people with mental illness</td>
</tr>
<tr>
<td><strong>Tangata Whenua</strong></td>
<td>The people (local) of the land, i.e. the tribe who hold spiritual authority over the land (e.g. Porirua - Ngati Toa)</td>
</tr>
<tr>
<td><strong>Values</strong></td>
<td>Principles considered important by an individual or group of people</td>
</tr>
<tr>
<td><strong>Whanau</strong></td>
<td>Family/extended family in a Maori cultural context</td>
</tr>
</tbody>
</table>
ADVANCED PRACTICE STANDARD

Mental Health Nurses demonstrate advanced practice when they are able to integrate at a level of excellence, the six previous standards using skills in clinical practice, leadership, management, research and education.

Rationale

It is reasonable that nurses during the course of their careers will develop advanced skills in nursing and nursing related environments. Therefore it is appropriate that these skills be acknowledged and identified. A Mental Health Nurse is considered to have advanced practice skills if he or she can demonstrate that he or she has more than five years, or five years equivalent, full time experience and a post graduate qualification, or can demonstrate skills in advanced nursing practice.

Advanced practice nurses, by whatever title, perform in leadership roles in management, consultancy, research, education and clinical practice and will be found in environments such as clinical fields, educational institutions, government departments, administrative structures, and national/international advisory and professional bodies.

These nurses go beyond specialised competency. They are individual, independent and innovative in their work and demonstrate the highest level of achievement in ethics, practice and standards of professional conduct.

Knowledge, Skills and Attitudes

The Advanced Practice Mental Health Nurse:

1. Uses integrated, autonomous skills grounded in an appropriate knowledge base.
2. Responds to consumers, colleagues, peers and students with insight and wisdom.
3. Guides colleagues through sharing knowledge gained by inquiry and evaluation.

Performance Criteria

Advanced Practice Mental Health Nurses will be found in:

♦ Clinical Practice
♦ Independent Practice
♦ Specialised Clinical Units
♦ Senior Management Roles
♦ Educational Institutions
♦ Professional Organisations
♦ Forums of Debate on Moral, Ethical and Theoretical Issues

Nurses meeting the Advanced Practice Standard would be worthy of consideration for admission to Fellowship in the College.
BIBLIOGRAPHY

Australian and New Zealand College of Mental Health Nurses (1993). Standards of Nursing Practice.


